POSITION		ID NO.	DATE
CLASSIFIER		7	7-25-95
EXAMINER		Jmm	8/9/95
TYPIST	PB	S63	9/27/9
VERIFIER		230	9-27-95
CORPS CORR.			
SPEC. HAND		451 bw	9-11-95
FILE MAINT.			9/9
DRAFTING			

INDEX OF CLAIMS

Claim		Date						
Final	Original							
1	1	✓	≡					
2	2							
3	3							
4	4							
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6	6							
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11	13	≡						
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15	17	✓						
16	18	✓	≡					
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Claim		Date						
Final	Original							
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BEST AVAILABLE COPY

SYMBOLS

✓	....	Rejected
≡	....	Allowed
– (Through numeral)		Canceled
+	....	Restricted
N	....	Non-elected
I	....	Interference
A	....	Appeal
O	....	Objected